



Town of Arlington

Water & Sewer Division

Application for Adjustment, Abatement or Water/Sewer Usage Information

Customers must complete this form for all applications and inquiries regarding water/sewer usage on bills. Customers are required to have paid all uncontested prior bills (including penalties and interest, if applicable). The request for an abatement or adjustment must be received in the Water Department Office within 30 days of the date of the bill in dispute. Customers should pay the contested bill on or before the due date to avoid interest charges.

Check applicable issue: Adjustment Abatement 0 (zero usage) e (estimated bill)

Name: _____

Phone #: _____

Service

Address: _____

Email

Address: _____

Account #: _____

Mailing Address if different from Service

Address: _____

I request an adjustment or abatement for the Billing Period _____ (Issue Date of Bill) in the Amount of _____ (dollar amount of Bill) due to reason stated below.

Please check the type of Adjustment/Abatement:

Adjustment for error or miscalculation in bill.

Abatement for Water/Sewer charges for a major water leak that resulted in a large volume of water used: Customer must submit a proof of repair, a written description as to the cause of the leak, a copy of the repair bill with proof of payment.

Details/Reasons for questioning bill usage. (Attach additional sheets if necessary):

Customer Signature _____ Date _____

Please attach any other supporting documentation.

Email completed form to: DPWwaterbillquestions@town.arlington.ma.us

Or mail to: DPW Water Bill, 51 Grove St., Arlington MA 02476